



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

CITY OF MELROSE  
REGISTRARS OF VOTERS

2023 NOV - 2 PM 2:00  
File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 11/1/23 Ending Date: 10/20/23

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

<u>Cal M. Finocchiaro</u>
Candidate Full Name (if applicable)
<u>City Council - Ward 6</u>
Office Sought and District
<u>54 Gooch St. Melrose MA 02176</u>
Residential Address
E-mail: <u>cal.forward@gmail.com</u>
Phone # (optional):

<u>Committee to elect Cal. Finocchiaro</u>
Committee Name
<u>Mark Finocchiaro</u>
Name of Committee Treasurer
<u>54 Gooch St. Melrose MA 02176</u>
Committee Mailing Address
E-mail: <u>Finocchiaro.me@gmail.com</u>
Phone # (optional):

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>0.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>6789.54</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6789.54</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>3850.47</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>2939.07</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0.00</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>0.00</u>
Line 8: Name of bank(s) used:	<u>Wakefield Cooperative</u>

### Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature)

Date: 11/2/23

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Candidate's signature)

Date: 11/2/23

OK

Enter on page 1, line 4 →

Page 5

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/1/23	Sondra Aiello 02176 25 Arlington St Melr	97.19	
10/9/23	11 Birch Hill Rd 02172 Matthew Acen & Melr	60	
6/20/23	Amanda Bates 02172 10 Elmcroft Cir Melr	100	
9/5/23	Ruba + Bell 02172 173 Ashland St Melr	250	Lawyer / Bell + Izzy
6/20/23	David Berkel 02176 31 Apple Hill Rd Melrose	100	
9/13/23	Kacey Blevins 241 Grove St Melrose, MA 02176	100	
10/9/23	Donald Bryly 62 Conrad Rd. Melrose, MA 02176	100	
6/20/23	Jason Bussy 23 Good St. Melrose, MA 02176	200	Manager Dir. Intapp
9/1/23	Jason Bussy 23 Good St Melrose, MA 02176	19.44	
9/1/23	John Burke 132 Bellevue Melrose, MA 02176	48.60	
9/1/23	Lon Burns 132 County Club Rd Melrose, MA 02176	29.16	
10/9/23	Mark Callahan 121 Laurel St Melrose, MA 02176	50	
Line 9: Total Receipts over \$50 (or listed above)		8	
Line 10: Total Receipts \$50 and under* (not listed above)		4	
Line 11: TOTAL RECEIPTS IN THE PERIOD		12	← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/9/23	Christian Nakkarian 54 Fitch St Somerville MA 02145	100	
7/14/23	Stephanie Nelson 299 Grove St. Melro MA 02176	201	Director of Chamber Melro MA
6/15/23	Jiana Pellegrino 143 E. Emerald St. Melro MA 02176	100	
10/7/23	Alyssa Pierce 105 Whitman Ave Melro MA 02176	60	
10/7/23	Julie Pino 89 Stratford Rd Melro MA 02176	60	
9/1/23	Thomas Pino 89 Stratford Rd Melro MA 02176	97.19	
9/15/23	Jean Powers 2 Church Circle Melro MA 02176	60	
9/23/23	Krista Reidy 73 Orchard Ave Melro MA 02176	200	Principal - Malden MA
6/20/23	Mauran Rock 251 Grove St Melro MA 02176	100	
6/20/23	Joseph Senna 37 Wedgemen Ave Melro MA 02176	300	Dermatologist Cohay Burlington
9/15/23	Earle Solano 24 Marmion Rd. Melro MA 02176	75	
6/13/23	Elen Steward 325 Swain Road Melro MA 02176	100	
9/1/23	Elen Steward 325 Swain Road Melro MA 02176	29.30	
Line 9: Total Receipts over \$50 (or listed above)		11	
Line 10: Total Receipts \$50 and under* (not listed above)		2	
Line 11: TOTAL RECEIPTS IN THE PERIOD		13	← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
6/15/23	Michelle Carson 110 Linwood Ave Melrose MA 02176	20	
10/3/23	Brenda Chisholm 132 E. Felt St Melrose MA 02176	100	
9/1/23	Lindsay Chisholm 132 E. Felt St Melrose MA 02176	97.15	
10/8/23	Tosyah Clark 22 Sheffield Rd. Melrose MA 02176	60	
6/20/23	Dore Dargatz 219 Melrose St Melrose MA 02176	50	
9/25/23	Myron Dittmer 93 Alhambra Ave Melrose MA 02176	100	
10/16/23	Tara Eofaharian 177 Upham St Melrose MA 02176	50	
9/1/23	Cara Fanci 37 Cranston Rd. Melrose MA 02176	48.60	
6/15/23	Laura Fay 3 Greenway Rd. Melrose MA 02176	50	
6/15/23	Mark Finocchiano 59 Good St Melrose MA 02176	100	
6/9/23	Mark Granpae 41 Moreland St Melrose MA 02176	150	
6/15/23	Heather Gaudet 210 Hingham Lane Jupiter FL 33458	25	
10/4/23	Jennifer Grante 14 Pine St. Melrose MA 02176	50	
Line 9: Total Receipts over \$50 (or listed above)		6	
Line 10: Total Receipts \$50 and under* (not listed above)		7	
Line 11: TOTAL RECEIPTS IN THE PERIOD		13	← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/11/23	Kenneth Grady 102 Altamont Rd Melrose MA 02176	100	
6/20/23	Ward Hamilton 87 E. Emerson St Melrose MA 02176	100	
6/20/23	Christie Hickey 168 Woodcrest Rd Melrose MA 02176	100	
9/1/23	Laura Hitchman 66 Goss Ave Melrose MA 02176	48.60	
9/1/23	Katie Kelley 6 Geneva Rd Melrose MA 02176	60	
9/1/23	Katie Kelley 6 Geneva Rd Melrose MA 02176	24.30	
9/15/23	Mike Kennedy 1 Russett Lane Melrose MA 02176	500	JJ. Vaccaro / Builder
	<del>Kara Kimpatrick 111 Meadowcroft Rd Melrose MA 02176</del>		
6/20/23	Robert Kirby 124 E. Fifth St Melrose MA 02176	50	
10/9/23	Mitch Koerber 109 Highview Ave Melrose MA 02176	60	
9/1/23	Donna LaMenta 18 Brookledge Melrose MA 02176	48.60	
10/17/23	Jason London 270 1st St Melrose MA 02176	75	
10/5/23	Melissa Lucas 22 Slayton Rd Melrose MA 02176	100	

Line 9: Total Receipts over \$50 (or listed above) 8

Line 10: Total Receipts \$50 and under\* (not listed above) 84

Line 11: TOTAL RECEIPTS IN THE PERIOD 12,100/1/2024

← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.



**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/8/23	Mike Lyle 5 Maple Circle Melrose MA 02176	100.	
6/20/23	Leigh Maciel 26 Grosr Ave Melrose MA 02176	50	
6/15/23	Charles Madden 81 Surfside Rd. Dennis MA 01920	100.	retired
6/20/23	Despina Makruden 59 Richardson Rd. Melrose MA 02176	300	retired
10/9/23	Despina Makruden 59 Richardson Rd. Melrose MA 02176	60	
9/1/23	Despina Makruden 59 Richardson Rd. Melrose MA 02176	38.85	
9/1/23	Marganne Makruden 37 Wedgeman Ave Winchester MA 01890	97.19	
6/20/23	Maria Martin 94 Althamst Ave Melrose MA 02176	100	
9/15/23	Robert McCaughy Sr. 7 Cedarwood Lane Melrose MA 02176	100	
9/15/23	Nicole McCaughy 17 Lincoln St. Melrose MA 02176	100.	
9/15/23	Bob McCaughy 35 Albion St. Melrose MA 02176	100	
6/18/23	John Mercer 62 East St. Melrose MA 02176	200	ATF - Federal agent
10/9/23	Peter Morpimer 47 Mt Hood Terr Melrose MA 02176	100	
Line 9: Total Receipts over \$50 (or listed above)		11	
Line 10: Total Receipts \$50 and under* (not listed above)		2	
Line 11: TOTAL RECEIPTS IN THE PERIOD		13	← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
10/8/23	Jason Taggart 16A Austin St Simsbury CT 06487	60	
10/9/23	Tanika Venuti 39 Altamont Ave Melrose MA 02176	100	
10/8/23	May Walsh 17 Gannett Rd. Melrose MA 02176	60	
10/10/23	Todd Weaver 75 Altamont Ave Melrose MA 02176	100	
6/20/23	Alex Zedros 35 Wildwood Rd Melrose MA 02176	100	

Line 9: Total Receipts over \$50 (or listed above)	5
Line 10: Total Receipts \$50 and under* (not listed above)	0
Line 11: TOTAL RECEIPTS IN THE PERIOD	5

← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.



## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
8/31/23	Connolly Printing	17 B Gill St Woburn, MA 01801	Lawn signs + literature	1218.42
9/27/23	Connolly Printing	17B Gill St	additional lawn signs	244.38
9/27/23	Connolly Printing	17B Gill St	Mailers	940.42
9/27/23	Connolly Printing	17 B Gill St.	Palm cards	584.38
9/27/23	Despina Makrechi	59 Richardson Rd. Belmont MA 02178	donation - Food drive	97.13
9/13/23	Mass General Hospital	55 Fruit St Boston MA 02114	donation - Breast Fried & Walk	252.50
Line 12: Total Expenditures over \$50 (or listed above)				6
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → <b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>				6

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.